

San Bernardino County

Land Use Services Department, Planning Division

San Bernardino County Government Center, 385 N. Arrowhead Ave., San Bernardino, CA 92415-0182 15900 Smoke Tree Street; Hesperia, CA 92345

San Bernardino Office – (909) 387-8311 Fax (909) 387-3249 High Desert Office – (760) 995-8140 Fax (760) 995-8167



CONDITION COMPLIANCE CHECK – ACTUAL COST (Land Use Review) INFORMATION SHEET AND APPLICATION

This application and process is used to verify an applicant's compliance with the County Development Code and/or the Conditions of Approval that were established at the time of approval of a Tentative Tract and that are to be completed or complied with prior to recordation of the tract.

This application and fee must be submitted in these cases to initiate and complete the required review process.

Fee: Submit a money order or check made payable to "San Bernardino County" in the amount of

\$1,450.00. (L632)

Application: Submit one copy of the completed application to the Current Planning Department. Use the

application that is on the backside of this information sheet.

Documentation: Submit all documentation available providing proof of compliance with the Conditions of

Approval or with provisions/requirements of the Development Code (i.e. water purveyor service

letter, sewer letter, etc.).

Plans: Submit five copies of precise grading plan/plot plan showing building footprints, lot lines and setback dimensions as is applicable or required for the project.

CONDITION COMPLIANCE CHECK – ACTUAL COST APPLICATION

Complete all sections of this form. If you believe that an item does not apply to your project, mark it "N/A." Do not leave any blank spaces.

Section 1 - APPLICATION INFORMATION Owner's Name: Address: City: Zip: _____ FAX No.: _____ E-Mail: _____ Phone: Original Applicant Name: Engineer/Representative Name: Address: _____ Zip: _____ _____ FAX No.: _____ E-Mail: _____ Section 2 - PROJECT DESCRIPTION APN: Tract Number: Community: Index Number (if known): Section 3 - SIGNATURE I certify under penalty of perjury that I an the (check one) Legal Owner (all individuals must sign as their names appear on the deed to the land), OR П Owner's legal Agent, and that the foregoing is true and correct. (Please submit an authorization letter from legal owners). Date Signature Signature Date To be completed by County Staff: Filing Date: ______ Project No.: _____ JCS Project No.: _____